

USM-285 is a 5 part form. Fill out the form and print 5 copies. Sign as needed and route as specified below

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America	COURT CASE NUMBER 17-05549
DEFENDANT CAROL A. STOUT & DAVID A. STOUT	TYPE OF PROCESS Handbill

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

CAROL A. STOUT

ADDRESS (Street or RFD, Apartment No., City, State and ZIP code)

5300 Heidelberg Heights Road f/k/a 1404 Heidelberg Heights Road Germansville, PA 19053

SEND NOTICE OF SERVICE COPY OF REQUESTER AT NAME AND ADDRESS BELOW

KML Law Group, P.C.
701 Market St.
Suite 5000
Philadelphia, PA 19106Number of process to be
served with this Form 285Number of parties to be
served in this caseCheck for service
on U.S.A.RECEIVED
UNITED STATES MARSHAL
2018 NOV 16 PM 2:32
EASTERN DISTRICT OF
PENNSYLVANIASPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers and Estimated Times Available for Service)

Please post the property by January 13, 2019.

JAN 28 2019

KATE BARKMAN, Clerk

By Dep. Clerk

Signature of Attorney other Originator requesting service behalf of

☒ PLAINTIFF
☐ DEFENDANTTELEPHONE NUMBER
215-627-1322DATE
11/16/18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 66	District to Serve No. 66	Signature of Authorized USMS Deputy or Clerk <i>George K...</i>	Date 11/16/18
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date 01/16/2019	Time 4:05	<input type="checkbox"/> ver <input checked="" type="checkbox"/> pra
Signature of U.S. Marshal or Deputy <i>Paul Miller</i>		

Service Fee	Total Sizable Charges including endowors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or (Amount of Refund)
	22.89				22.89 30.00

REMARKS: NOTICE PISTED ON WINDOW TO THE RIGHT OF FRONT DOOR.

1 ENDEAVOR, 1 DUSM, 42 MILES R/T

PRINT 5 COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/80